

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 13 AM 11:43

0002306 AF

DOCUMENT # A30521 1. Entity Name SCHRIMSHER LAND FUND VII, LTD.			
Principal Place of Business 600 EAST COLONIAL DR. STE. 100 ORLANDO FL 32803		Mailing Address 600 EAST COLONIAL DR. STE. 100 ORLANDO FL 32803-4647	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address Suite, Apt. #, etc. City & State Zip	
4. FEI Number 59-3023515		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHRIMSHER, J. STEVEN 600 EAST COLONIAL DR. #100 ORLANDO FL 32803		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
9. Capital Contributions as Shown on record: \$1,700,100.00		10. Amount of Capital Contributions in FLORIDA to date: 1,700,100.00	
11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # P98000004654 NAME JSS OF ORLANDO, INC. STREET ADDRESS 600 E COLONIAL DR., #100 CITY - ST - ZIP ORLANDO FL		STREET ADDRESS CITY - ST - ZIP	
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DO NOT WRITE IN THIS SPACE

CR2E003 (9/99)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Steven Schrimsher **REQUIRED** 4/10/00 (407) 423-7600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #